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Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
NORTHERN DISTRICT OF ILLINOIS		
Case number (if known)	Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	☐ Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	t 1: Identify Yourself			
	-	About Debtor 1:	About D	ebtor 2 (Spouse Only in a Joint Case):
1.	Your full name			
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport).	Jeremy First name D. Middle name	First nan	
	Bring your picture identification to your meeting with the trustee.	Watson Last name and Suffix (Sr., Jr., II, III)	Last nam	ne and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years			
	Include your married or maiden names.			
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-8942		

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Case number (if known)

Debtor 1 **Jeremy D. Watson**

		About Debtor 1:	,	About Debtor 2 (Spouse Only in a Joint Case):
1.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names	I have not used any business name or EINs. Business name(s) EINs	Ē	☐ I have not used any business name or EINs. Business name(s) EINs
5.	Where you live	10465 Bluebonnet Drive Machesney Park, IL 61115 Number, Street, City, State & ZIP Code Winnebago County If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address. Number, P.O. Box, Street, City, State & ZIP Code	(! i	The Debtor 2 lives at a different address: Number, Street, City, State & ZIP Code County If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address. Number, P.O. Box, Street, City, State & ZIP Code
6.	Why you are choosing this district to file for bankruptcy	Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. Explain. (See 28 U.S.C. § 1408.)	I	Check one: ☐ Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. ☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)

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Case number (if known) Debtor 1 **Jeremy D. Watson**

⊃ar	t 2: Tell the Court About	Your Ba	ankruptcy Ca	ise			
7.	The chapter of the Bankruptcy Code you are				of each, see <i>Notice Required by</i> f page 1 and check the appropriat	11 U.S.C. § 342(b) for Individuals Filing for Bankrupto e box.	y
	choosing to file under	■ Ch	apter 7				
		☐ Ch	apter 11				
		☐ Ch	apter 12				
		☐ Ch	apter 13				
3.	How you will pay the fee		about how yo	ou may pay. Typ attorney is subi	pically, if you are paying the fee yo	k with the clerk's office in your local court for more de urself, you may pay with cash, cashier's check, or mo alf, your attorney may pay with a credit card or check	oney
					tallments. If you choose this options (Official Form 103A).	on, sign and attach the Application for Individuals to P	ay
			I request that but is not req	nt my fee be wa uired to, waive y	nived (You may request this option your fee, and may do so only if yo	n only if you are filing for Chapter 7. By law, a judge m ur income is less than 150% of the official poverty line i installments). If you choose this option, you must fill	e that
						ial Form 103B) and file it with your petition.	out
).	Have you filed for bankruptcy within the	■ No.					
	last 8 years?	☐ Yes			NA/II	Occasional	
			District		When When	Case number	
			District		when When	Case number Case number	
			District		vvnen	Case Humber	
10.	Are any bankruptcy cases pending or being	■ No					
	filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	☐ Yes	S.				
	annate:		Debtor			Relationship to you	
			District	-	When	Case number, if known	
			Debtor	-		Relationship to you	
			District		When	Case number, if known	
11.	Do you rent your	■ No.	Go to I	ine 12.			
	residence?	☐ Yes		our landlord obta	ained an eviction judgment agains	t you and do you want to stay in your residence?	
		□ 168	s.	No. Go to line	, , ,	.,	
				Yes. Fill out In	itial Statement About an Eviction .	Judgment Against You (Form 101A) and file it with this	s
				bankruptcy per	tition.		

Document Page 4 of 64 Case number (if known) Debtor 1 Jeremy D. Watson Part 3: Report About Any Businesses You Own as a Sole Proprietor 12. Are you a sole proprietor of any full- or part-time No. Go to Part 4. business? Name and location of business ☐ Yes. A sole proprietorship is a business you operate as Name of business, if any an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. Number, Street, City, State & ZIP Code If you have more than one sole proprietorship, use a separate sheet and attach it to this petition. Check the appropriate box to describe your business: Health Care Business (as defined in 11 U.S.C. § 101(27A)) Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate Chapter 11 of the deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of Bankruptcy Code and are operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure you a small business in 11 U.S.C. 1116(1)(B). debtor? I am not filing under Chapter 11. No. For a definition of small business debtor, see 11 I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy □ No. U.S.C. § 101(51D). I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. ☐ Yes. Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention 14. Do you own or have any ■ No. property that poses or is alleged to pose a threat ☐ Yes. of imminent and What is the hazard? identifiable hazard to public health or safety? Or do you own any

property that needs immediate attention?

> For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?

If immediate attention is needed, why is it needed?

Where is the property?

Number, Street, City, State & Zip Code

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Debtor 1 Jeremy D. Watson

15. Tell the court whether

you have received a briefing about credit counseling.

Part 5:

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

Explain Your Efforts to Receive a Briefing About Credit Counseling

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit counseling because of:

Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

Case number (if known)

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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Document Page 6 of 64 Case number (if known) Debtor 1 Jeremy D. Watson Part 6: **Answer These Questions for Reporting Purposes** Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an 16. What kind of debts do 16a. individual primarily for a personal, family, or household purpose." you have? ☐ No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. ☐ No. Go to line 16c. ☐ Yes. Go to line 17. State the type of debts you owe that are not consumer debts or business debts 16c. 17. Are you filing under □ No. I am not filing under Chapter 7. Go to line 18. Chapter 7? Do you estimate that I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses Yes. after any exempt are paid that funds will be available to distribute to unsecured creditors? property is excluded and administrative expenses No are paid that funds will be available for ☐ Yes distribution to unsecured creditors? 18. How many Creditors do 1-49 **1**,000-5,000 **1** 25,001-50,000 you estimate that you **5001-10,000 5**0,001-100,000 **50-99** owe? **1**0,001-25,000 ☐ More than 100,000 **1**00-199 □ 200-999 How much do you **\$0 - \$50,000** □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion estimate your assets to □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion **\$50,001 - \$100,000** be worth? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion **□** \$100.001 - \$500.000 □ \$100,000,001 - \$500 million ☐ More than \$50 billion □ \$500.001 - \$1 million 20. How much do you □ \$0 - \$50,000 □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion estimate your liabilities □ \$50,001 - \$100,000 □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion to be? **\$100,001 - \$500,000** □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion □ \$100,000,001 - \$500 million ☐ More than \$50 billion □ \$500,001 - \$1 million Sign Below Part 7: For you I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11. United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Jeremy D. Watson Signature of Debtor 2 Jeremy D. Watson

Executed on

MM / DD / YYYY

Signature of Debtor 1

Executed on March 21, 2017

MM / DD / YYYY

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Debtor 1 Jeremy D. Watson Page 7 01 04

Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Daniel	A. Springer	Date	March 21, 2017
Signature of	Attorney for Debtor		MM / DD / YYYY
Daniel A.	Springer		
Printed name			
Springer L	₋aw Firm		
Firm name			
2222 E Sta	ate St		
Suite 107			
Rockford,	IL 61104		
Number, Street,	City, State & ZIP Code		
Contact phone	815.312.4725	Email address	dspringerlaw@gmail.com
6314059			
Bar number & S	tate		

		DOCHM	eni Pade 8 dib)4	
Fill in this infor	mation to identify your	case:			
Debtor 1	Jeremy D. Watso	n			
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
Case number					
(if known)					☐ Check if this is an amended filing
					9

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

			assets of what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	44,930.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	33,105.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	78,035.00
Pa	t 2: Summarize Your Liabilities		
			iabilities nt you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	76,294.22
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	1,800.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	211,025.0
	Your total liabilities	\$	289,119.25
Pa	tt 3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	3,375.02
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	3,275.00
Pa	t 4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	ır other sc	hedules.
7.	■ Yes What kind of debt do you have?		

- Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.
- Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Debtor 1 Jeremy D. Watson Page 9 of 64 Case number (if known)

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

\$______4,627.77

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total	claim
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	1,800.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	1,800.00

Case 17-80630 Doc 1 Filed 03/21/17 Entered 03/21/17 11:17:25 Desc Main Document Page 10 of 64 Fill in this information to identify your case and this filing: Debtor 1 Jeremy D. Watson Middle Name Last Name First Name Debtor 2 (Spouse, if filing) First Name Middle Name Last Name United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS Case number Check if this is an amended filing Official Form 106A/B Schedule A/B: Property 12/15 In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part 1: Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In 1. Do you own or have any legal or equitable interest in any residence, building, land, or similar property? ■ No. Go to Part 2. Yes. Where is the property? What is the property? Check all that apply 3341 Hanover Drive Single-family home Do not deduct secured claims or exemptions. Put Street address, if available, or other description the amount of any secured claims on Schedule D: Duplex or multi-unit building Creditors Who Have Claims Secured by Property. Condominium or cooperative П Manufactured or mobile home Current value of the Current value of the Rockford 61101-0000 ☐ Land portion you own? entire property? ZIP Code \$44,930.00 \$44,930.00 State Investment property Timeshare Describe the nature of your ownership interest □ Other (such as fee simple, tenancy by the entireties, or a life estate), if known. Who has an interest in the property? Check one Fee simple Debtor 1 only Winnebago Debtor 2 only County

2. Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for pages you have attached for Part 1. Write that number here......>>

\$44,930.00

Check if this is community property

(see instructions)

Part 2: Describe Your Vehicles

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Debtor 1 and Debtor 2 only

property identification number:

At least one of the debtors and another

Other information you wish to add about this item, such as local

3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles

■ No

☐ Yes

5 1	Case 17-8		DOC 1	Document	Page 11 o)3/21/17 11:1 f 64		Desc Main
Debtor 1	Jeremy D. W		A-71/			Case number		
4. watercra Examples	art, aircraft, mot s: Boats, trailers,	motors, pe	rsonal water	other recreational veh craft, fishing vessels, s	nowmobiles, moto	orcycle accessories	ies	
■ No								
☐ Yes								
				for all of your entries f				\$0.00
.pages y	ou nave attache	ed for Part	2. write tha	at number here			=>	
	scribe Your Perso							
Do you ow	n or have any le	egal or equ	uitable inter	est in any of the follow	ving items?			Current value of the portion you own? Do not deduct secured claims or exemptions.
	old goods and f			hina, kitchenware				
□ No	,	,						
Yes.	Describe							
		Househ	old Goods	& Furniture]	\$275.00
□ No				stereo, and digital equi	pment; computer	s, printers, scanner	s, music co	ollections; electronic devices
		2 TV's, 0	Cellphones	S]	\$500.00
Example □ No	oles of value es: Antiques and other collection				oks, pictures, or o	other art objects; sta	amp, coin,	or baseball card collections;
		Books,	Pictures]	\$25.00
■ No □ Yes. 10. Firearm Examp □ No	musical instru Describe	graphic, ex uments	ercise, and c	other hobby equipment; n, and related equipmer		oles, golf clubs, skis	; canoes a	and kayaks; carpentry tools;
		Rifle, Pi	etal				1	\$400.00
		Kille, Pl	SIUI				1	Ψ400.00
11. Clothes Examp □ No	s oles: Everyday clo	othes, furs.	looth or oo at					

Schedule A/B: Property

Official Form 106A/B

\$400.00

Used Clothing

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Case number (if known) Document Debtor 1 Jeremy D. Watson 12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver Yes. Describe..... \$200.00 2 Watches, Costume Jewelry 13. Non-farm animals Examples: Dogs, cats, birds, horses ☐ No Yes. Describe..... 1 Dog \$0.00 14. Any other personal and household items you did not already list, including any health aids you did not list ■ No ☐ Yes. Give specific information..... 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached \$1.800.00 for Part 3. Write that number here Part 4: Describe Your Financial Assets Do you own or have any legal or equitable interest in any of the following? Current value of the portion you own? Do not deduct secured claims or exemptions. 16. Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition ■ No ☐ Yes..... 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. □ No Institution name: Yes..... **Checking Account with Rock Valley Credit** \$5.00 Union, Loves Park IL 17.1. **Health Savings Account through Current** \$300.00 **Employer** 17.2 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts ■ No Institution or issuer name: ☐ Yes..... 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture ■ No ☐ Yes. Give specific information about them..... % of ownership: Name of entity: 20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. ☐ Yes. Give specific information about them

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Case number (if known) Debtor 1 Jeremy D. Watson Issuer name: 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans □ No Yes. List each account separately. Type of account: Institution name: 401(k) **Owens Corning** \$31,000.00 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others ☐ Yes. Institution name or individual: 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) Issuer name and description. ☐ Yes..... 24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). No Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c): ☐ Yes..... 25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit ■ No ☐ Yes. Give specific information about them... 26. Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements ☐ Yes. Give specific information about them... 27. Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses ■ No ☐ Yes. Give specific information about them... Current value of the Money or property owed to you? portion you own? Do not deduct secured claims or exemptions. 28. Tax refunds owed to you ■ No ☐ Yes. Give specific information about them, including whether you already filed the returns and the tax years...... 29. Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement ☐ Yes. Give specific information..... 30. Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else ■ No ☐ Yes. Give specific information.. 31. Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance No Official Form 106A/B Schedule A/B: Property page 4

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Debtor 1	Case 17-80630 Jeremy D. Watson	Doc 1	Filed 03/21/17 Document	Entered 03/21/17 11:17:25 Page 14 of 64 Case number (if known)	Desc Main
DCDIOI 1	Jeremy D. Watson			Case number (# known)	
☐ Yes.	Name the insurance compa Com	any of each po pany name:	licy and list its value.	Beneficiary:	Surrender or refund value:
If you some of	terest in property that is deare the beneficiary of a living one has died. Give specific information			ed isurance policy, or are currently entitled to rece	eive property because
Examp ■ No	s against third parties, who oles: Accidents, employmen Describe each claim			it or made a demand for payment s to sue	
■ No	contingent and unliquidat Describe each claim	ed claims of o	every nature, includin	g counterclaims of the debtor and rights to	set off claims
■ No	nancial assets you did not Give specific information	already list			
				ny entries for pages you have attached	\$31,305.00
Part 5: De	scribe Any Business-Related	Property You	Own or Have an Interest	In. List any real estate in Part 1.	
37. Do vou	own or have any legal or equi	table interest i	n anv business-related p	roperty?	
`	to Part 6.		,		
☐ Yes. 0	Go to line 38.				
	scribe Any Farm- and Commo			n or Have an Interest In.	
46. Do yo u	ı own or have any legal or	equitable int	terest in any farm- or	commercial fishing-related property?	
■ No.	Go to Part 7.				
☐ Yes	s. Go to line 47.				
Part 7:	Describe All Property You	Own or Have a	n Interest in That You Did	d Not List Above	
	u have other property of an oles: Season tickets, country				
	Give specific information				
54. Add 1	the dollar value of all of yo	our entries fro	om Part 7. Write that n	number here	\$0.00

Official Form 106A/B Schedule A/B: Property page 5

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Case number (if known) Document Debtor 1 Jeremy D. Watson

Part	8: List the Totals of Each Part of this Form			
55.	Part 1: Total real estate, line 2			\$44,930.00
56.	Part 2: Total vehicles, line 5	\$0.00		
57.	Part 3: Total personal and household items, line 15	\$1,800.00		
58.	Part 4: Total financial assets, line 36	\$31,305.00		
59.	Part 5: Total business-related property, line 45	\$0.00		
60.	Part 6: Total farm- and fishing-related property, line 52	\$0.00		
61.	Part 7: Total other property not listed, line 54 +	\$0.00		
62.	Total personal property. Add lines 56 through 61	\$33,105.00	Copy personal property total	\$33,105.00
63.	Total of all property on Schedule A/B. Add line 55 + line 62			\$78,035.00

Official Form 106A/B Schedule A/B: Property page 6

		17(7(1111))		<i>,</i> —		
Fill in this informa	Fill in this information to identify your case:					
Debtor 1	Jeremy D. Watso	n				
	First Name	Middle Name	Last Name			
Debtor 2						
(Spouse if, filing)	First Name	Middle Name	Last Name			
United States Bank	kruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS			
Case number						
(if known)						

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
 - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
 - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption
	Copy the value from Schedule A/B	Che	ck only one box for each exemption.	
Household Goods & Furniture Line from Schedule A/B: 6.1	\$275.00		\$275.00	735 ILCS 5/12-1001(b)
Ellie Holli Gelledale PAB. G.1			100% of fair market value, up to any applicable statutory limit	
2 TV's, Cellphones	\$500.00		\$500.00	735 ILCS 5/12-1001(b)
Line IIIIII Schedule A/B. 7.1			100% of fair market value, up to any applicable statutory limit	
Books, Pictures	\$25.00		\$25.00	735 ILCS 5/12-1001(b)
Ellie Holli Golloddie 172. Gri			100% of fair market value, up to any applicable statutory limit	
Rifle, Pistol Line from Schedule A/B: 10.1	\$400.00		\$400.00	735 ILCS 5/12-1001(b)
Ellie Holli Golloddie 1722. 1611			100% of fair market value, up to any applicable statutory limit	
Used Clothing Line from Schedule A/B: 11.1	\$400.00		\$400.00	735 ILCS 5/12-1001(a)
Line Hom Schedule A/D. 11.1			100% of fair market value, up to any applicable statutory limit	

Document Page 17 of 64 Debtor 1 Jeremy D. Watson Case number (if known) Brief description of the property and line on Current value of the Amount of the exemption you claim Specific laws that allow exemption Schedule A/B that lists this property portion you own Copy the value from Check only one box for each exemption. Schedule A/B 2 Watches, Costume Jewelry 735 ILCS 5/12-1001(b) \$200.00 \$200.00 Line from Schedule A/B: 12.1 100% of fair market value, up to any applicable statutory limit 401(k): Owens Corning 735 ILCS 5/12-1006 \$31,000.00 100% Line from Schedule A/B: 21.1 100% of fair market value, up to any applicable statutory limit 3. Are you claiming a homestead exemption of more than \$160,375? (Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.) Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?

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No

Yes

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Fill in this information to identify yo	ur case:				
Debtor 1 Jeremy D. Wats	son				
First Name		st Name		-	
Debtor 2					
(Spouse if, filing) First Name	Middle Name La	st Name		-	
United States Bankruptcy Court for the	: NORTHERN DISTRICT OF ILLING	is.			
ormed diates barmapies court for the				=	
Case number					
(if known)				☐ Check	if this is an
				ameno	led filing
Official Forms 400D					
Official Form 106D					
Schedule D: Creditors	s Who Have Claims Se	cured by	y Propert	У	12/15
	If two married people are filing together, bout, number the entries, and attach it to the				
1. Do any creditors have claims secured b	y your property?				
☐ No. Check this box and submit	this form to the court with your other sch	edules. You ha	ve nothing else t	to report on this form.	
■ Yes. Fill in all of the information	bolow		0	•	
	below.				
Part 1: List All Secured Claims			olumn A	Column B	Column C
	more than one secured claim, list the creditor	separately		Value of collateral	Unsecured
much as possible, list the claims in alphabet	s a particular claim, list the other creditors in F tical order according to the creditor's name.		mount of claim on not deduct the	that supports this	portion
			alue of collateral.	claim	If any
2.1 Capital One Bank Creditor's Name	Describe the property that secures the c		\$2,839.00	\$44,930.00	\$2,839.00
Creditor's Name	3341 Hanover Drive Rockford, I 61101 Winnebago County	L			
	As of the date you file, the claim is: Chec	k all that			
PO Box 30281	apply.	K all triat			
Salt Lake City, UT 84130	Contingent				
Number, Street, City, State & Zip Code	Unliquidated				
Miles source the debt O of	☐ Disputed				
Who owes the debt? Check one.	Nature of lien. Check all that apply.				
Debtor 1 only	☐ An agreement you made (such as morto car loan)	gage or secured			
Debtor 2 only	_				
☐ Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechan	ic's lien)			
☐ At least one of the debtors and another	Judgment lien from a lawsuit				
☐ Check if this claim relates to a	Other (including a right to offset)				
community debt					
Date debt was incurred 2/2010	Last 4 digits of account number				
	_				
Illinois Department of					
Revenue	Describe the property that secures the c	laim:	\$1,131.01	\$44,930.00	\$1,131.01
Creditor's Name	3341 Hanover Drive Rockford, I	L			
	61101 Winnebago County				
Bankruptcy Section	As of the date you file, the claim is: Chec	k all that			
PO Box 64338 Chicago, IL 60664	apply.				
	Contingent				
Number, Street, City, State & Zip Code	Unliquidated				
Who owes the debt? Check one.	Disputed Nature of lien. Check all that apply.				
_	☐ An agreement you made (such as mortg	nage or secured			
■ Debtor 1 only	car loan)	gage or secured			
Debtor 2 only		iola lian\			
☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	☐ Statutory lien (such as tax lien, mechan☐ Judgment lien from a lawsuit	ics lien)			
Check if this claim relates to a	_				
community debt	Other (including a right to offset)				
Both title and the state of	Local Botto				
Date debt was incurred	Last 4 digits of account number				

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Debtor 1 Jeremy D. Watson Cas					se number (if know)				
	First Name	Middle Name	Last Name						
2.3	Strategic Realty Fun		escribe the property that secures	the claim:	\$72,324.21	\$44,930.00	\$27,394.21		
	Creditor's Name	33	341 Hanover Drive Rockfo	rd, IL					
	c/o Stonecrest Finar	ncial 6	61101 Winnebago County						
4300 Stevens Creek Blvd.		s of the date you file, the claim is	* Chack all that						
	#275	ар	ply.	Check all that					
	San Jose, CA 95129	<u> </u>	Contingent						
	Number, Street, City, State & Zip	p Code	Unliquidated						
Who	o owes the debt? Check on		Disputed ature of lien. Check all that apply.						
	Debtor 1 only		An agreement you made (such as	mortgage or secured	d				
	Debtor 2 only		car loan)						
_	Debtor 1 and Debtor 2 only		Statutory lien (such as tax lien, me	echanic's lien)					
	at least one of the debtors and		Judgment lien from a lawsuit	,					
	Check if this claim relates to community debt	_	Other (including a right to offset)	First Mortgage	e				
Date	debt was incurred _9/200	05	Last 4 digits of account num	nber					
Ad	d the dollar value of your e	ntries in Colur	nn A on this page. Write that nun	nber here:	\$76,294.2	22			
	=		dollar value totals from all pages		\$76,294.2				
Wr	ite that number here:				\$70,294.2	.2			
Part	2: List Others to Be N	lotified for a	Debt That You Already Listed	1					
			otified about your bankruptcy for		andy listed in Bort 1. Ea	overnle if a collecti	ion ogonov io		
tryin	g to collect from you for a	debt you owe t	to someone else, list the creditor	in Part 1, and then	list the collection agen	cy here. Similarly, if y	ou have more		
	one creditor for any of the is in Part 1, do not fill out or		u listed in Part 1, list the addition	al creditors here. If	you do not have addition	onal persons to be not	tified for any		
uebi	s in Part 1, do not ini out or	submit this p	aye.						
Ш	Name, Number, Street, Cit	tv. State & Zip (Code	On which lir	o in Port 1 did you ontor	the graditor? 21			
	Freedman, Anselmo			On which line in Part 1 did you enter the creditor? 2.1					
	1771 W. Diehl Road	l, Suite 150		Last 4 digits	Last 4 digits of account number				
	Naperville, IL 60563	3							
$\overline{\Box}$									
Ш	Name, Number, Street, Cit			On which lir	On which line in Part 1 did you enter the creditor? 2.2				
	Linebarger Goggan	Blair & Sa	mpson						
	35946 Eagle Way			Last 4 digits	Last 4 digits of account number				
	Chicago, IL 60678								
_	Name, Number, Street, Cit Veripro Solutions Ir		Jode	On which lir	ne in Part 1 did you enter	the creditor? 2.3			
	PO Box 3572	iic.		Loot 4 digita	s of account number				
	Coppell, TX 75019			Last 4 digits	or account number				
П									
	Name, Number, Street, Cit			On which lir	ne in Part 1 did you enter	the creditor? 2.1			
	Winnebago County		rk		-				
	400 West State #109	9		Last 4 digits	s of account number				
	2009 SC 4289 Rockford, IL 61101								
	Nockiola, IL 01101								

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Fill in this in	formation to identify your case:						
Debtor 1	Jeremy D. Watson						
	First Name	Middle Name Las	st Name				
Debtor 2 (Spouse if, filing)	First Name	Middle Name Las	st Name				
United States	Bankruptcy Court for the: NO	RTHERN DISTRICT OF ILLINO	IS				
Case number (if known)					_	if this is an led filing	
					a		
	orm 106E/F	_				_	
Schedule	E/F: Creditors Who	Have Unsecured Cla	aims			12/15	
eft. Attach the name and case	editors Who Have Claims Secured be Continuation Page to this page. If your number (if known). St All of Your PRIORITY Unsecu	ou have no information to report i					
	editors have priority unsecured clair						
□ No. Go	• •	ns against you:					
Yes	to run 2.						
identify what possible, lis Part 1. If m	your priority unsecured claims. If a cat type of claim it is. If a claim has both st the claims in alphabetical order according than one creditor holds a particula planation of each type of claim, see the	n priority and nonpriority amounts, lis ording to the creditor's name. If you h r claim, list the other creditors in Par	t that claim here a nave more than to t 3.	and show both priority a	nd nonpriority amoun aims, fill out the Contil	ts. As much as nuation Page of Nonpriority	
2.1 IRS		Look 4 digito of account no		¢4 900 00	amount \$4,000,00	amount	
Priorit Cent PO E Phila	y Creditor's Name tralized Insolvency Operatio Box 7346 adelphia, PA 19101		ed? 2013	\$1,800.00	\$1,800.00	\$0.00	
	er Street City State Zlp Code urred the debt? Check one.	As of the date you file, the	ciaim is: Check	all that apply			
■ Debto		☐ Contingent					
_							
_	☐ Disputed ☐ Debtor 1 and Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ Debtor 1 and Debtor 2 only						
	st one of the debtors and another	Domestic support obligations					
_	k if this claim is for a community de	_		e government			
	im subject to offset?	Claims for death or person	,	J			
■ No		Other. Specify					
Yes			e Taxes				

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Debtor 1 Jeremy D. Watson Case number (if know) \$0.00 2.2 \$0.00 Kirsten Watson Last 4 digits of account number \$0.00 Priority Creditor's Name 10465 Bluebonnet Dr. When was the debt incurred? Machesney Park, IL 61115 As of the date you file, the claim is: Check all that apply Number Street City State Zlp Code Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only ■ Unliquidated Debtor 2 only ☐ Disputed Type of PRIORITY unsecured claim: ☐ Debtor 1 and Debtor 2 only Domestic support obligations At least one of the debtors and another ☐ Check if this claim is for a community debt ☐ Taxes and certain other debts you owe the government $oxedsymbol{\square}$ Claims for death or personal injury while you were intoxicated Is the claim subject to offset? ■ No Other. Specify ☐ Yes **Child Support** Part 2: List All of Your NONPRIORITY Unsecured Claims 3. Do any creditors have nonpriority unsecured claims against you? ☐ No. You have nothing to report in this part. Submit this form to the court with your other schedules. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If you have more than three nonpriority unsecured claims fill out the Continuation Page of Total claim 4.1 AT&T Last 4 digits of account number \$117.00 Nonpriority Creditor's Name When was the debt incurred? PO Box 769 Arlington, TX 76004 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent ■ Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts

☐ Yes

■ Other. Specify Utilities

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Debtor 1 Jeremy D. Watson Case number (if know) 4.2 \$6,848.00 **BMO Harris Bank** Last 4 digits of account number Nonpriority Creditor's Name PO Box 1577 When was the debt incurred? 11/2005 Coppell, TX 75019 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims \square Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Automobile Deficiency ☐ Yes 4.3 City of Rockford Last 4 digits of account number \$460.89 Nonpriority Creditor's Name When was the debt incurred? 425 E. State Street Rockford, IL 61104 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes **Utilities** Other. Specify **Common Boundary Wellness** \$1,431.00 4.4 Center Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 4873 Manhattan Drive Rockford, IL 61108 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Medical Bills ☐ Yes

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Debtor 1 Jeremy D. Watson Case number (if know) 4.5 \$744.96 **Commonwealth Edison** Last 4 digits of account number Nonpriority Creditor's Name 3 Lincoln Center When was the debt incurred? Attn:Bkcy Group - Claims Department Villa Park, IL 60181 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts No ■ Other. Specify Utilities ☐ Yes 4.6 **Convergent Healthcare Recoveries** Last 4 digits of account number \$100.00 Nonpriority Creditor's Name When was the debt incurred? 124 SW Adams Street, Suite 215 Peoria, IL 61602 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes **Medical Bills** Other. Specify 4.7 **Crusader Clinic** \$171.00 Last 4 digits of account number Nonpriority Creditor's Name 1100 Broadway When was the debt incurred? Rockford, IL 61104 Number Street City State ZIp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent ■ Unliquidated Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes ■ Other. Specify Medical Bills

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Jeremy D. Watson	Case number (if know)	
Dish Network	Last 4 digits of account number	\$192.00
Nonpriority Creditor's Name 9601 South Meridian Boulevard Englewood, CO 80112	When was the debt incurred?	
Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
■ Debtor 1 only	☐ Contingent	
☐ Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt	Obligations arising out of a separation agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	
■ No	Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify Utilities	
Don Carter Lanes	Last 4 digits of account number	\$25.00
Nonpriority Creditor's Name 4007 East State Street Rockford, IL 61108	When was the debt incurred?	
Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt s the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims	
No	☐ Debts to pension or profit-sharing plans, and other similar debts	
□ Yes	■ Other. Specify Fees	
First Premier Bank		\$471.00
Nonpriority Creditor's Name	Last 4 digits of account number	Ψ471.00
3820 N. Louise Avenue	When was the debt incurred?	
Sioux Falls, SD 57107 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	As of the date you me, the claim is. Oneck an that apply	
■ Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
□ Yes	Other Specify Credit Card Purchases	
— 100	= Onner Specify Strain Said and Strain	

Document Page 25 of 64 Debtor 1 Jeremy D. Watson Case number (if know) 4.1 **HSBC Bank** \$1,512.00 Last 4 digits of account number Nonpriority Creditor's Name PO Box 9 When was the debt incurred? Buffalo, NY 14240 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Credit Card Purchases ☐ Yes 4.1 **Infinity Healthcare Physicians** \$28.17 Last 4 digits of account number Nonpriority Creditor's Name 111 E. Wisconsin Avenue, Suite When was the debt incurred? 2100 Milwaukee, WI 53202 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Medical Bills ☐ Yes 4.1 Inpatient Consultants of IL \$1,759.00 Last 4 digits of account number 3 Nonpriority Creditor's Name PO Box 92934 When was the debt incurred? Los Angeles, CA 90009 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not

■ No

☐ Yes

report as priority claims

■ Other. Specify Medical Bills

 \square Debts to pension or profit-sharing plans, and other similar debts

Is the claim subject to offset?

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Debtor 1 Jeremy D. Watson Case number (if know) 4.1 Laura Epstein \$2,270.00 Last 4 digits of account number Nonpriority Creditor's Name 6072 Brynwood Drive #203 When was the debt incurred? Rockford, IL 61114 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Attorney Fees ☐ Yes 4.1 Litton Loan Servicing \$17,215.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 4848 Loop Central Houston, TX 77081 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only □ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No \square Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Mortgage Deficiency ☐ Yes 4.1 **National Bank & Trust Sycamore** \$1.418.91 Last 4 digits of account number 6 Nonpriority Creditor's Name 230 West State Street When was the debt incurred? Sycamore, IL 60178 Number Street City State ZIp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts

☐ Yes

■ Other. Specify Auto Deficiency

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Case number (if know)

Debtor 1 Jeremy D. Watson 4.1 **Nicor Gas** \$85.82 Last 4 digits of account number Nonpriority Creditor's Name PO Box 2020 When was the debt incurred? Aurora, IL 60507 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes ■ Other. Specify Utilities 4.1 Ocwen Loan Servicing \$33,700.00 Last 4 digits of account number 8 Nonpriority Creditor's Name When was the debt incurred? 12650 Ingenuity Drive Orlando, FL 32826 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only □ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Mortgage Deficiency ☐ Yes 4.1 Ocwen Loan Servicing LLC \$134.800.00 9 Last 4 digits of account number Nonpriority Creditor's Name 1661 Worthington Road #100 When was the debt incurred? West Palm Beach, FL 33409 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts

☐ Yes

■ Other. Specify Mortgage Deficiency

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Document Page 28 of 64 Debtor 1 Jeremy D. Watson Case number (if know) 4.2 **OSF Saint Anthony Medical Center** \$2,113.00 Last 4 digits of account number 0 Nonpriority Creditor's Name 5666 East State Street When was the debt incurred? Rockford, IL 61108 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes ■ Other. Specify Medical Bills 4.2 **Physicians Immediate Care** \$366.06 Last 4 digits of account number Nonpriority Creditor's Name PO Box 8798 When was the debt incurred? Carol Stream, IL 60197 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only □ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Medical Bills ☐ Yes 4.2 **Progressive Insurance** \$92.00 Last 4 digits of account number Nonpriority Creditor's Name 6300 Wilson Mills Road When was the debt incurred? Cleveland, OH 44143 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated

☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ☐ Yes ■ Other. Specify Insurance

Document Page 29 of 64 Case number (if know) Debtor 1 Jeremy D. Watson 4.2 RMH Pathologists Ltd. \$32.36 Last 4 digits of account number 3 Nonpriority Creditor's Name 6785 Weaver Road, Suite D When was the debt incurred? Rockford, IL 61114 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Medical Bills ☐ Yes 4.2 Rock River Water Reclamation Dist. \$70.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 3501 Kishwaukee Street Rockford, IL 61109 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only □ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Utilities ☐ Yes 4.2 Rockford Associated Pathologists \$418.00 Last 4 digits of account number Nonpriority Creditor's Name 1400 Charles Street When was the debt incurred? Rockford, IL 61104 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims

■ No

☐ Yes

■ Other. Specify Medical Bills

 $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts

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Desc Main Document Page 30 of 64 Debtor 1 Jeremy D. Watson Case number (if know) 4.2 **Rockford Health Physicians** \$270.00 Last 4 digits of account number 6 Nonpriority Creditor's Name 2300 N. Rockton Avenue When was the debt incurred? Rockford, IL 61103 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Medical Bills ☐ Yes 4.2 **Rockford Health System** \$1,725.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 2400 N. Rockton Avenue Rockford, IL 61103 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only □ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Medical Bills ☐ Yes 4.2 **Rockford Orthopedic** \$472.57 Last 4 digits of account number 8 Nonpriority Creditor's Name 324 Roxbury Road When was the debt incurred? Rockford, IL 61107 Number Street City State ZIp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated

Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ☐ Yes ■ Other. Specify Medical Bills

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Document Page 31_of 64 Debtor 1 Jeremy D. Watson Case number (if know) 4.2 **Rockford Radiology Associates** \$321.00 Last 4 digits of account number 9 Nonpriority Creditor's Name 2400 N. Rockton Avenue When was the debt incurred? Rockford, IL 61103 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes ■ Other. Specify Medical Bills 4.3 **Security Finance Corporation** \$220.00 Last 4 digits of account number 0 Nonpriority Creditor's Name When was the debt incurred? PO Box 3146 Spartanburg, SC 29304 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only □ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Payday Loan ☐ Yes 4.3 **Security Finance Corporation** \$972.00 Last 4 digits of account number Nonpriority Creditor's Name PO Box 3146 When was the debt incurred? Spartanburg, SC 29304 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans

debt

■ No

☐ Yes

report as priority claims

■ Other. Specify Payday Loan

☐ Obligations arising out of a separation agreement or divorce that you did not

 $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts

☐ Check if this claim is for a community

Is the claim subject to offset?

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Name and Address	On which entry in Part 1 or Part 2 did you list the original creditor?					
Account Receivables Management	Line 4.14 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims				
7834 N. 2nd Street, Unit 5 Machesney Park, IL 61115		■ Part 2: Creditors with Nonpriority Unsecured Claims				
, , ,	Last 4 digits of account number					
Name and Address	On which entry in Part 1 or Part 2 did you list the original creditor?					
Allied Interstate	Line 4.8 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims				
PO Box 4000 Warrenton, VA 20188		■ Part 2: Creditors with Nonpriority Unsecured Claims				
Walletten, VA 20100	Last 4 digits of account number					
Name and Address	On which entry in Part 1 or Part 2	did you list the original creditor?				
Contract Callers Inc.	Line 4.5 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims				
PO Box 212489 Augusta, GA 30917		■ Part 2: Creditors with Nonpriority Unsecured Claims				
Augusta, CA 60017	Last 4 digits of account number					
Name and Address	On which entry in Part 1 or Part 2	did you list the original creditor?				
Convergent Healthcare Recoveries	Line 4.20 of (<i>Check one</i>):	☐ Part 1: Creditors with Priority Unsecured Claims				
124 SW Adams Street, Suite 215 Peoria, IL 61602		■ Part 2: Creditors with Nonpriority Unsecured Claims				
,	Last 4 digits of account number					

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Debtor 1 Jeremy D. Watson

Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Credit Collections Svc. Line 4.22 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims PO Box 9134 ■ Part 2: Creditors with Nonpriority Unsecured Claims Needham Heights, MA 02494 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Cybrcollect Line 4.9 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims PO Box 1145 Part 2: Creditors with Nonpriority Unsecured Claims La Crosse, WI 54601 Last 4 digits of account number On which entry in Part 1 or Part 2 did you list the original creditor? Name and Address **Enhanced Recovery Corporation** Line **4.33** of (*Check one*): ☐ Part 1: Creditors with Priority Unsecured Claims PO Box 57547 ■ Part 2: Creditors with Nonpriority Unsecured Claims Jacksonville, FL 32241 Last 4 digits of account number On which entry in Part 1 or Part 2 did you list the original creditor? Name and Address **Enhanced Recovery Corporation** Line 4.1 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims PO Box 57547 ■ Part 2: Creditors with Nonpriority Unsecured Claims Jacksonville, FL 32241 Last 4 digits of account number On which entry in Part 1 or Part 2 did you list the original creditor? Name and Address Harris & Harris, Ltd. Line 4.17 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims 111 West Jackson Blvd. Suite 400 Part 2: Creditors with Nonpriority Unsecured Claims Chicago, IL 60604 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? IC System Line 4.13 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims PO Box 64378 Part 2: Creditors with Nonpriority Unsecured Claims Saint Paul, MN 55164 Last 4 digits of account number On which entry in Part 1 or Part 2 did you list the original creditor? Name and Address JC Christensen & Associates Line 4.32 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims 215 N. Benton Drive Part 2: Creditors with Nonpriority Unsecured Claims Sauk Rapids, MN 56379 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? LVNV Funding LLC Line 4.11 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims PO Box 10497 Part 2: Creditors with Nonpriority Unsecured Claims Greenville, SC 29603 Last 4 digits of account number On which entry in Part 1 or Part 2 did you list the original creditor? Name and Address Midland Funding Line 4.11 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims 8875 Aero Drive, Suite 200 Part 2: Creditors with Nonpriority Unsecured Claims San Diego, CA 92123 Last 4 digits of account number On which entry in Part 1 or Part 2 did you list the original creditor? Name and Address Miramed Revenue Group Line 4.26 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims 991 Oak Creek Drive Part 2: Creditors with Nonpriority Unsecured Claims Lombard, IL 60148 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? **Nationwide Credit Corporation** Line 4.12 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims 5503 Cherokee Avenue South ■ Part 2: Creditors with Nonpriority Unsecured Claims Alexandria, VA 22312 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Northland Group Inc. Line **4.11** of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims

PO Box 390486

Part 2: Creditors with Nonpriority Unsecured Claims

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Debtor 1 Jeremy D. Watson

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Minneapolis, MN 55439	Last 4 digits of account number	
Name and Address Pendrick Capital Partners LLC 6029 Ridge Ford Drive Burke, VA 22015		ou list the original creditor? ☐ Part 1: Creditors with Priority Unsecured Claims ■ Part 2: Creditors with Nonpriority Unsecured Claims
,	Last 4 digits of account number	
Name and Address Rockford Mercantile Agency, Inc. 2502 South Alpine Road Rockford, IL 61108		ou list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
	Last 4 digits of account number	
Name and Address Rockford Mercantile Agency, Inc. 2502 South Alpine Road Rockford, IL 61108		ou list the original creditor? ☐ Part 1: Creditors with Priority Unsecured Claims ☐ Part 2: Creditors with Nonpriority Unsecured Claims
	Last 4 digits of account number	
Name and Address Rockford Mercantile Agency, Inc. 2502 South Alpine Road Rockford, IL 61108		ou list the original creditor? ☐ Part 1: Creditors with Priority Unsecured Claims ■ Part 2: Creditors with Nonpriority Unsecured Claims
*	Last 4 digits of account number	
Name and Address Rockford Mercantile Agency, Inc. 2502 South Alpine Road		ou list the original creditor? ☐ Part 1: Creditors with Priority Unsecured Claims ☐ Part 2: Creditors with Nonpriority Unsecured Claims
Rockford, IL 61108	Last 4 digits of account number	
Name and Address Rockford Mercantile Agency, Inc. 2502 South Alpine Road Rockford, IL 61108		ou list the original creditor? ☐ Part 1: Creditors with Priority Unsecured Claims ■ Part 2: Creditors with Nonpriority Unsecured Claims
Name and Address State Collection Service PO Box 6250 Madison, WI 53701	On which entry in Part 1 or Part 2 did you Line 4.4 of (Check one):	ou list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
Name and Address Stellar Recovery Inc. 1327 Highway 2 W, Suite 100 Kalispell, MT 59901	On which entry in Part 1 or Part 2 did you Line 4.8 of (Check one):	ou list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
Name and Address Transworld Systems Inc. 507 Prudential Road Horsham, PA 19044		ou list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
Name and Address United Credit Service 15 N. Lincoln PO Box 740 Elkhorn, WI 53121		ou list the original creditor? ☐ Part 1: Creditors with Priority Unsecured Claims ■ Part 2: Creditors with Nonpriority Unsecured Claims
Name and Address Virtuoso Sourcing Group Attn: Bankruptcy Dept. 4500 E Cherry Creek South Dr. #300 Denver, CO 80246	On which entry in Part 1 or Part 2 did you Line 4.12 of (Check one):	ou list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims

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Debtor 1 Jeremy D. Watson

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				Total Claim
	6a.	Domestic support obligations	6a.	\$ 0.00
Total claims				
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$ 1,800.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$ 0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$ 0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$ 1,800.00
				Total Claim
	6f.	Student loans	6f.	\$ 0.00
Total claims				
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$ 0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$ 0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$ 211,025.03
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$ 211,025.03

		1700.0000	111 FAUE 30 01 04		
Fill in this information to identify your case:					
Debtor 1	Jeremy D. Watso	n			
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Bankruptcy Court for the:		NORTHERN DISTRICT	OF ILLINOIS		
Case number					
(if known)					

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	company with	whom you have the or, Street, City, State and ZIP C	contract or lease	State what the contract or lease is for
2.1					
	Name				_
	Number	Street			_
	City		State	ZIP Code	_
2.2					
	Name				_
	Number	Street			_
	City		State	ZIP Code	_
2.3					
	Name				_
	Number	Street			_
	City		State	ZIP Code	
2.4					
	Name				_
	Number	Street			_
	City		State	ZIP Code	
2.5					
	Name				_
	Number	Street			
	City		State	ZIP Code	_
	•				

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		Docume	ent Page 37 d	of 64
Fill in this	information to identify your	case:		
Debtor 1	Jeremy D. Watso	n .		
Dobto: 1	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing	g) First Name	Middle Name	Last Name	
United Stat	es Bankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case numb	per			
(if known)				☐ Check if this is an
				amended filing
Official	Form 106H			
Sched	ule H: Your Cod	lebtors		12/15
our name	and case number (if known). Answer every question		to this page. On the top of any Additional Pages, write
1. Do y	ou have any codebtors? (If	you are filing a joint case,	do not list either spouse	e as a codebtor.
■ No				
☐ Yes				
Arizona No.	nin the last 8 years, have yo a, California, Idaho, Louisiana Go to line 3. . Did your spouse, former spo	a, Nevada, New Mexico, Pu	erto Rico, Texas, Wash	ry? (Community property states and territories include inington, and Wisconsin.)
3. In Colu in line Form 1	umn 1, list all of your codeb 2 again as a codebtor only	tors. Do not include your if that person is a guaran	spouse as a codebtor	r if your spouse is filing with you. List the person show sure you have listed the creditor on Schedule D (Offic 06G). Use Schedule D, Schedule E/F, or Schedule G to
	Column 1: Your codebtor	ZID Code		Column 2: The creditor to whom you owe the deb
IN	lame, Number, Street, City, State and Z	LII Ooue		Check all schedules that apply:
3.1				☐ Schedule D, line
	Name			☐ Schedule E/F, line
				☐ Schedule G, line
_	Number Street			<u> </u>
	City	State	ZIP Code	
				□ Octobrio D. Par
3.2	Name			☐ Schedule D, line
,				☐ Schedule E/F, line
				☐ Schedule G, line
	Number Street			_
C	City	State	ZIP Code	

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Fill	in this information to identify your ca	ase:				•					
Del	otor 1 Jeremy D. W	/atson									
	otor 2 puse, if filing)				_						
Uni	ted States Bankruptcy Court for the	: NORTHERN DISTRIC	CT OF ILLINOIS								
O Se	fficial Form 1061 chedule I: Your Incomes complete and accurate as poss		pple are filing togethe	· (Debt	or 1	☐ An☐ A s 13	income a	d filing ent showin as of the fo	ollowing	12/1	
sup spo atta	plying correct information. If you use. If you are separated and you ch a separate sheet to this form. **Describe Employment**	are married and not filing wi	ng jointly, and your spith you, do not include	oouse i e infori	s liv nati	ing with y on about y	ou, inclu your spo	ude inforn use. If mo	nation ore spa	about your ace is needed,	
1.	Fill in your employment information.		Debtor 1			1	Debtor 2	or non-fi	ling sp	oouse	
	If you have more than one job, attach a separate page with	Employment status	■ Employed □ Not employed				☐ Emplo	-			
	information about additional employers.	Occupation	Tech 2								
	Include part-time, seasonal, or self-employed work.	Employer's name	OC Foam Insulat	ion, Ll	LC						
	Occupation may include student or homemaker, if it applies.	Employer's address	2710 Laude Drive Rockford, IL 6110								
		How long employed the	here? 6 years				_				
Pai	Give Details About Mor	nthly Income									
	mate monthly income as of the dause unless you are separated.	ate you file this form. If y	you have nothing to rep	ort for	any	line, write S	\$0 in the	space. Ind	clude yo	our non-filing	
	ou or your non-filing spouse have mo e space, attach a separate sheet to		ombine the information	for all e	emple	oyers for th	nat perso	n on the li	nes bel	low. If you need	į
						For Debt	or 1	For Del			
2.	List monthly gross wages, sala deductions). If not paid monthly,	•		2.	\$	4,1	114.15	\$		N/A	
3.	Estimate and list monthly overt	ime pay.		3.	+\$		0.00	+\$		N/A	

Calculate gross Income. Add line 2 + line 3.

4. **\$ 4,114.15**

N/A

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Deb	Debtor 1 Jeremy D. Watson		-	С	ase	number (if knowr	1)				
						Debtor 1			Debtor filing s	2 or pouse	
	Cop	by line 4 here	4.		\$_	4,114.1	5_	\$		N/A	<u>\</u>
5.	List	all payroll deductions:									
	5a.	Tax, Medicare, and Social Security deductions	5a	. :	\$	588.8	1	\$		N/A	\
	5b.	Mandatory contributions for retirement plans	5b		\$_	0.0		\$		N/A	
	5c.	Voluntary contributions for retirement plans	5c.		\$	0.0	0	\$		N/A	<u> </u>
	5d.	Required repayments of retirement fund loans	5d	l. :	\$_	0.0	0	\$		N/A	<u> </u>
	5e.	Insurance	5e		\$	150.3	2	\$		N/A	\
	5f.	Domestic support obligations	5f.		\$_	0.0	_	\$		N/A	_
	5g.	Union dues	5g		\$_	0.00	_	\$		N/A	
	5h.	Other deductions. Specify:	_ 5h	.+	\$_	0.0	<u>)</u> -	+ \$		N/A	<u>\</u>
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	(§ _	739.13		\$		N/A	<u>\</u>
7.	Cal	culate total monthly take-home pay. Subtract line 6 from line 4.	7.	5	§ _	3,375.0	2	\$		N/A	<u>\</u>
8.	List 8a.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly not income.	90		¢	0.00	•	¢		N/ /0	
	0h	monthly net income. Interest and dividends	8a 8b		\$_ \$	0.00		\$		N/A	
	8b. 8c.	Family support payments that you, a non-filing spouse, or a dependent	OD		Φ_	0.0	<u>J</u>	Φ		N/A	<u>\</u>
	00.	regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.		\$	0.0	0_	\$		N/A	
	8d.	Unemployment compensation	8d		\$	0.0		\$		N/A	_
	8e.	Social Security	8e		\$_	0.0	0	\$		N/A	<u>\</u>
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	8f.		\$	0.0		\$		N/A	_
	8g.	Pension or retirement income	8g		\$	0.0		\$		N/A	_
	8h.	Other monthly income. Specify:	_ 8h	.+	\$_	0.0	<u>)</u> -	+ \$		N/A	<u>\</u>
9.	Add	d all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$		0.0	D	\$		N/	Α
10	Cal	culate monthly income. Add line 7 + line 9.	10.	\$		3,375.02 +	\$		N/A	= \$	3,375.02
10.		I the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.		Ψ_		3,37 3.02	Ψ_		17/7	,	3,373.02
11.	Star Incli othe Do	te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your er friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not accify:	depe					-	chedule 11.		0.00
12.		If the amount in the last column of line 10 to the amount in line 11. The rester that amount on the Summary of Schedules and Statistical Summary of Certainlies							12.	\$	3,375.02
13.	Do	you expect an increase or decrease within the year after you file this form	?							Combi month	ined Ily income
		No.									

Official Form 106I Schedule I: Your Income page 2

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EIII	in this information to identify your case:		1		
	· ·		Observa	Lateria de	
Deb	Jeremy D. Watson			k if this is: An amended filing	
	otor 2ouse, if filing)			A supplement show	ving postpetition chapter the following date:
Unit	ted States Bankruptcy Court for the: NORTHERN DISTRICT OF ILL	LINOIS	-	MM / DD / YYYY	
	se numbernown)				
Of	fficial Form 106J				
So	chedule J: Your Expenses				12/1
info	as complete and accurate as possible. If two married people ormation. If more space is needed, attach another sheet to the mber (if known). Answer every question.				
Par					
1.	Is this a joint case? No. Go to line 2.				
	☐ Yes. Does Debtor 2 live in a separate household?				
	☐ No ☐ Yes. Debtor 2 must file Official Form 106J-2, <i>Expens</i>	ses for Separate House	e <i>hold</i> of Debt	or 2.	
2.	Do you have dependents? ☐ No				
	Do not list Debtor 1 and Debtor 2. Fill out this information for each dependent	•		Dependent's age	Does dependent live with you?
	Do not state the	Danahtan		40	□ No
	dependents names.	Daughter		12	■ Yes □ No
					☐ Yes
					□ No
					☐ Yes
					□ No
3.	Do your expenses include				☐ Yes
Э.	expenses of people other than yourself and your dependents?				
Est exp	Estimate Your Ongoing Monthly Expenses timate your expenses as of your bankruptcy filing date unles benses as of a date after the bankruptcy is filed. If this is a suplicable date.				
the	elude expenses paid for with non-cash government assistance value of such assistance and have included it on <i>Schedule</i> ificial Form 106I.)			Your exp	enses
4.	The rental or home ownership expenses for your residence payments and any rent for the ground or lot.	e. Include first mortgag	e 4. \$		750.00
	If not included in line 4:				
	4a. Real estate taxes		4a. \$		0.00
	4b. Property, homeowner's, or renter's insurance		4b. \$		0.00
	4c. Home maintenance, repair, and upkeep expenses		4c. \$		50.00
5	4d. Homeowner's association or condominium dues	homo oquity loons	4d. \$ 5. \$		0.00
5.	Additional mortgage payments for your residence, such as	HOITIE EQUITY TOANS	ე. ֆ		0.00

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or 1 _ J	Jeremy D. Watson	Case number (if known)	
Utilities	s:		
	Electricity, heat, natural gas	6a. \$	0.00
	Vater, sewer, garbage collection	6b. \$	0.00
	elephone, cell phone, Internet, satellite, and cable services	6c. \$	175.00
	Other. Specify:	6d. \$	0.00
	nd housekeeping supplies	7. \$	700.00
	are and children's education costs	8. \$	
			75.00
	ng, laundry, and dry cleaning	9. \$	150.00
	al care products and services	10. \$	150.00
	and dental expenses	11. \$	125.00
	ortation. Include gas, maintenance, bus or train fare.	12. \$	350.00
	include car payments.	·	
	ninment, clubs, recreation, newspapers, magazines, and bo		75.00
	able contributions and religious donations	14. \$	0.00
Insurar			
	include insurance deducted from your pay or included in lines 4		
	ife insurance	15a. \$	0.00
	Health insurance	15b. \$	0.00
15c. V	/ehicle insurance	15c. \$	75.00
15d. C	Other insurance. Specify:	15d. \$	0.00
Taxes.	Do not include taxes deducted from your pay or included in line	s 4 or 20.	
Specify	:	16. \$	0.00
Installn	nent or lease payments:		
	Car payments for Vehicle 1	17a. \$	0.00
	Car payments for Vehicle 2	17b. \$	0.00
	Other Specific	17c. \$	0.00
	Other. Specify:	17d. \$	0.00
	ayments of alimony, maintenance, and support that you di	· · ·	0.00
	ed from your pay on line 5, Schedule I, Your Income (Offici		450.00
	payments you make to support others who do not live with		0.00
Specify		19.	0.00
	eal property expenses not included in lines 4 or 5 of this for		
	Nortgages on other property	20a. \$	0.00
	Real estate taxes	20b. \$	
		·	0.00
	Property, homeowner's, or renter's insurance	20c. \$	0.00
	Maintenance, repair, and upkeep expenses	20d. \$	0.00
20e. H	lomeowner's association or condominium dues	20e. \$	0.00
Other:	Specify: Miscellaneous, Birthdays, Holidays, Hairci	21. +\$	100.00
IRS Re	epayment	+\$	50.00
	ate your monthly expenses		
	dd lines 4 through 21.		,275.00
22b. Cc	opy line 22 (monthly expenses for Debtor 2), if any, from Officia	Form 106J-2 \$	
22c. Ad	ld line 22a and 22b. The result is your monthly expenses.	\$ 3	,275.00
	, , ,		,
	ate your monthly net income.		
23a. C	Copy line 12 (your combined monthly income) from Schedule I.	23a. \$	3,375.02
23b. C	Copy your monthly expenses from line 22c above.	23b\$	3,275.00
23c. S	Subtract your monthly expenses from your monthly income.		465.5-
	The result is your <i>monthly net income</i> .	23c. \$	100.02
-		<u> </u>	
	expect an increase or decrease in your expenses within the		
For exam	mple, do you expect to finish paying for your car loan within the year or o	b you expect your mortgage payment to increase or decrease	se because
For exam	nple, do you expect to finish paying for your car loan within the year or c tion to the terms of your mortgage?	b you expect your mortgage payment to increase or decrease	se because
For exan		o you expect your mortgage payment to increase or decrea:	se because (

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Fill in this inforr	mation to identify your	case:			
Debtor 1	Jeremy D. Watson	n			
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	nkruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
Case number (if known)					☐ Check if this is an amended filing
Official Forn Declarat	-	n Individual	Debtor's Sci	nedules	12/15
You must file this obtaining money	s form whenever you fi	le bankruptcy schedules n connection with a bank		Making a false stater	nent, concealing property, or , or imprisonment for up to 20
Sigr	n Below				
Did you pa	y or agree to pay some	one who is NOT an attor	ney to help you fill out ba	inkruptcy forms?	
■ No					
☐ Yes. N	Name of person				ruptcy Petition Preparer's Notice, and Signature (Official Form 119)
	Ity of perjury, I declare e true and correct.	that I have read the sum	mary and schedules filed	with this declaration	n and
X /s/ Jere	emy D. Watson		X		
	y D. Watson		Signature of D	Debtor 2	

Date

Signature of Debtor 1

Date March 21, 2017

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-HI	in this inform	action to identify you	r 00001			
		nation to identify you				
De	btor 1	Jeremy D. Watso	Middle Name	Last Name		
	btor 2 buse if, filing)	First Name	Middle Name	Last Name		
Uni	ited States Bar	nkruptcy Court for the:	NORTHERN DISTRICT (OF ILLINOIS		
	se number				_	Check if this is an amended filing
Sta Be a info	as complete a	of Financial	attach a separate sheet to	are filing together, both are	ankruptcy equally responsible for sup additional pages, write you	
	<u> </u>		arital Status and Where You	ı Lived Before		
1.	What is your	current marital statu	ıs?			
	☐ Married ■ Not marri	ried				
2.	During the la	ıst 3 years, have you	lived anywhere other than	where you live now?		
	■ No □ Yes. List	t all of the places you l	ived in the last 3 years. Do no	ot include where you live now	<i>'</i> .	
	Debtor 1 Pri	or Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there
3. stat					ity property state or territor co, Texas, Washington and V	
	■ No □ Yes. Ma	ke sure you fill out <i>Scl</i>	nedule H: Your Codebtors (O	fficial Form 106H).		
Pa	rt 2 Explain	n the Sources of You	r Income			
4.	Fill in the tota	I amount of income yo	nployment or from operatin u received from all jobs and a have income that you receiv	all businesses, including part-		ndar years?
	□ No ■ Yes. Fill	in the details.				
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
		of current year until d for bankruptcy:	■ Wages, commissions, bonuses, tips	\$6,723.10	☐ Wages, commissions, bonuses, tips	
			☐ Operating a business		☐ Operating a business	

Official Form 107

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Case number (if known) Document Debtor 1 Jeremy D. Watson

							_		
				Debtor 1			Debtor 2		
				Sources of income Check all that apply.	(befo	ss income ore deductions and usions)	Sources of ince Check all that a		Gross income (before deductions and exclusions)
	r last caler inuary 1 to	dar year: December	31, 2016)	■ Wages, commissions, bonuses, tips		\$49,369.99	☐ Wages, com bonuses, tips	missions,	
				☐ Operating a business			☐ Operating a	ousiness	
		dar year be December		■ Wages, commissions, bonuses, tips		\$35,918.00	☐ Wages, com bonuses, tips	missions,	
				☐ Operating a business			☐ Operating a	ousiness	
5.	Include in and other winnings. List each	come regard public bene If you are fil source and	dless of whetl fit payments; ing a joint ca: the gross inco	e during this year or the tw ner that income is taxable. Ex- pensions; rental income; inte se and you have income that ome from each source separa	camples erest; divi	of other income are dends; money colle- vived together, list it	alimony; child supported from lawsuits; only once under De	royalties; and ebtor 1.	
	☐ Yes.	Fill in the de	etails.						
				Debtor 1	Cua	a in a a ma from	Debtor 2		Cress income
				Sources of income Describe below.	each (befo	ss income from a source ore deductions and usions)	Sources of incomposition Describe below.		Gross income (before deductions and exclusions)
	□ No.	individual During the No. Yes * Subject	primarily for a 90 days before Go to line 7 List below paid that or not include to adjustmen	each creditor to whom you pa reditor. Do not include payme payments to an attorney for t on 4/01/19 and every 3 yea	old purpo did you pa aid a tota ents for de this bank ars after th	se." ay any creditor a total of \$6,425* or more comestic support oblitions ruptcy case. nat for cases filed or	al of \$6,425* or mor in one or more pay gations, such as ch	re? ments and thild support an	ne total amount you nd alimony. Also, do
	■ Yes.	During the		or both have primarily consore you filed for bankruptcy, o			al of \$600 or more?		
		■ No. □ Yes	include pay	7. each creditor to whom you pa rments for domestic support or r this bankruptcy case.					
	Creditor	's Name an	d Address	Dates of paym	ent	Total amount paid	Amount you still owe	Was this p	payment for
7.	Insiders in of which y	clude your ou are an o	relatives; any fficer, director	bankruptcy, did you make general partners; relatives o r, person in control, or owner roprietor. 11 U.S.C. § 101. In	f any ger of 20% o	neral partners; partner or more of their votin	erships of which you g securities; and an	u are a gener ny managing	ral partner; corporation agent, including one fo
	Yes.	List all payr	nents to an ir	sider.					
	Insider's	Name and	Address	Dates of paym	ent	Total amount paid	Amount you still owe	Reason fo	r this payment
Offic	cial Form 107			Statement of Financial Af	ffairs for I	•			page :

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Case number (if known) Document Debtor 1 Jeremy D. Watson

	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for	this payment
	Gabe Grendel		\$1,500.00	\$1,000.00	Repay loar	١.
8.	Within 1 year before you filed for bankrupt insider? Include payments on debts guaranteed or cost		yments or transfer	any property on a	eccount of a de	bt that benefited an
	■ No □ Yes. List all payments to an insider					
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for Include credi	this payment tor's name
Par	t 4: Identify Legal Actions, Repossessio	ns, and Foreclosures				
9.	Within 1 year before you filed for bankrupt List all such matters, including personal injury modifications, and contract disputes.					
	□ No ■ Yes. Fill in the details.					
	Case title Case number	Nature of the case	Court or agency	,	Status of the	e case
	Jeremy Watson v. Ceroni Piping Company 2014 L 6	Personal Injury	Winnebago Co Court 400 W State St Rockford, IL 6	- !	☐ Pending ☐ On appea ☐ Conclude	
10.	Within 1 year before you filed for bankrupt Check all that apply and fill in the details belo No. Go to line 11. Yes. Fill in the information below.		erty repossessed,	foreclosed, garni	shed, attached	, seized, or levied?
	Creditor Name and Address	Describe the Property		Date		Value of the
		Explain what happene	d			property
11.	Within 90 days before you filed for bankru accounts or refuse to make a payment bed No ☐ Yes. Fill in the details.		cluding a bank or fi	nancial institutio	n, set off any a	mounts from your
	Creditor Name and Address	Describe the action th	e creditor took	Date taker	action was	Amount
12.	Within 1 year before you filed for bankrupt court-appointed receiver, a custodian, or a		erty in the possess	sion of an assigne	ee for the bene	fit of creditors, a
	■ No □ Yes					
Par	t 5: List Certain Gifts and Contributions					
13.	■ No	otcy, did you give any gif	ts with a total value	of more than \$60	00 per person?	
	Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 per person	Describe the gifts	.	Date the g	s you gave	Value
	Person to Whom You Gave the Gift and			tile g	jii to	

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14.	Within 2 years before you filed for bankro ■ No □ Yes. Fill in the details for each gift or c			ns with a total	value of more than	\$600 to any charity?
	Gifts or contributions to charities that to more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code	otal	Describe what you contributed		Dates you contributed	Value
Par	t 6: List Certain Losses					
15.	Within 1 year before you filed for bankru or gambling?	ptcy or	since you filed for bankruptcy, did	you lose anyth	ning because of thef	t, fire, other disaster,
	■ No □ Yes. Fill in the details.					
	Describe the property you lost and how the loss occurred	Include	the amount that insurance has paid. It ce claims on line 33 of Schedule A/B:	List pending	Date of your loss	Value of property lost
Par	t 7: List Certain Payments or Transfers	;				
16.	Within 1 year before you filed for bankru consulted about seeking bankruptcy or p Include any attorneys, bankruptcy petition p	reparin	g a bankruptcy petition?			rty to anyone you
	□ No ■ Yes. Fill in the details.					
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not Y	ou	Description and value of any prop transferred	erty	Date payment or transfer was made	Amount of payment
	Springer Law Firm 2222 East State Street, Suite 107 Rockford, IL 61104		\$500.00		3/2015	\$500.00
17.	Within 1 year before you filed for bankrupromised to help you deal with your creed Do not include any payment or transfer that	litors or	to make payments to your creditor		r transfer any propei	ty to anyone who
	Yes. Fill in the details.		Description and policy of accommon		D-11	A
	Person Who Was Paid Address		Description and value of any prop transferred	erty	Date payment or transfer was made	Amount of payment
18.	Within 2 years before you filed for bankri transferred in the ordinary course of you include both outright transfers and transfers include gifts and transfers that you have already	r busine made a	ess or financial affairs? as security (such as the granting of a s			
	■ No □ Yes. Fill in the details.					
	Person Who Received Transfer Address Person's relationship to you		Description and value of property transferred		ny property or received or debts hange	Date transfer was made

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Debtor 1 Jeremy D. Watson

19.	Within 10 years before you filed for bankrup beneficiary? (These are often called asset-pro No Yes. Fill in the details.		y property to a	self-settled	l trust or similar device	of which you are a	
	Name of trust	Description and v	alue of the prop	perty transf	erred	Date Transfer was made	
Par	List of Certain Financial Accounts, In	struments, Safe Deposit	t Boxes, and Sto	orage Units	;		
20.	Within 1 year before you filed for bankrupto sold, moved, or transferred? Include checking, savings, money market, chouses, pension funds, cooperatives, asso No Yes. Fill in the details.	or other financial accou	nts; certificates	of deposit;			
	Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)	Last 4 digits of account number	Type of accou		Date account was closed, sold, moved, or transferred	Last balance before closing or transfer	
21.	Do you now have, or did you have within 1 cash, or other valuables? No Yes. Fill in the details.	year before you filed for	bankruptcy, an	y safe depo	osit box or other depos	itory for securities,	
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had acc Address (Number, S State and ZIP Code)		Describe to	he contents	Do you still have it?	
22.	Have you stored property in a storage unit o ■ No □ Yes. Fill in the details.	or place other than your	home within 1	you filed for bankrupt	cy?		
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or h to it? Address (Number, S State and ZIP Code)		Describe to	he contents	Do you still have it?	
Par	19: Identify Property You Hold or Control	for Someone Else					
23.	Do you hold or control any property that so for someone.	meone else owns? Inclu	ude any propert	y you borro	owed from, are storing	for, or hold in trust	
	□ No■ Yes. Fill in the details.						
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the prop (Number, Street, City, S Code)		Describe t	he property	Value	
	Mother	10465 Bluebonr Machesney Par		2007 GM(MC Envoy \$4,000.0		

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Case number (if known) Document

Debtor 1 Jeremy D. Watson

Part 10: Give Details About Environmental Information

For the purpose of Part 10, the following definitions apply:

Environmental	l law	mea	ns a	any federal	, state, o	r local	stat	ute o	regulation	concerning	g pollu	ution, contar	nination, rel	eases o	of haz	ardous o	r
toxic substanc											ater, o	r other medi	um, includii	ng stati	utes o	r	
regulations co	ntrol	ling	the	cleanup of	these su	ubstan	ices,	wast	es, or mater	al.							
~				•••													

	Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.						
		<i>lous material</i> means anything an env ous material, pollutant, contaminant	ironmental law defines as a hazardous or similar term.	waste, haza	ardous substance, toxic	substance,	
Rep	ort all n	otices, releases, and proceedings th	at you know about, regardless of wher	they occur	red.		
24.	Has an	y governmental unit notified you tha	you may be liable or potentially liable	under or in	violation of an environm	ental law?	
	■ No	o es. Fill in the details.					
		of site SS (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)		nmental law, if you	Date of notice	
25.	Have y	ou notified any governmental unit of	any release of hazardous material?				
	■ No	o es. Fill in the details.					
		of site SS (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)		nmental law, if you t	Date of notice	
26.	Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.						
	■ No	o es. Fill in the details.					
	Case I	Title Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the	he case	Status of the case	
Pa	rt 11:	Give Details About Your Business or	Connections to Any Business				
27.	Within	4 years before you filed for bankrupt	cy, did you own a business or have an	y of the follo	owing connections to an	y business?	
	☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time						
	☐ A member of a limited liability company (LLC) or limited liability partnership (LLP)						
	☐ A partner in a partnership						
	☐ An officer, director, or managing executive of a corporation						
	☐ An owner of at least 5% of the voting or equity securities of a corporation						
	■ No. None of the above applies. Go to Part 12.						
	Yes. Check all that apply above and fill in the details below for each business.						
		ess Name	Describe the nature of the business				
	Address (Number, Street, City, State and ZIP Code)		Name of accountant or bookkeeper		Do not include Social Security number or ITIN. Dates business existed		

Document Page 49 of 64 Debtor 1 ase number (if known) Jeremy D. Watson 28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. No ☐ Yes. Fill in the details below. **Date Issued** Name Address (Number, Street, City, State and ZIP Code) Part 12: Sign Below I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Jeremy D. Watson Signature of Debtor 2 Jeremy D. Watson Signature of Debtor 1 Date March 21, 2017 Date Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? ■ No ☐ Yes Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

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☐ Yes. Name of Person . Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

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Fill in this information to identify your case:							
Debtor 1	Jeremy D. Watson	n					
	First Name	Middle Name	Last Name				
Debtor 2							
(Spouse if, filing)	First Name	Middle Name	Last Name				
United States Bank	kruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS				
Case number					☐ Check if this is an amended filing		

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

Part 1: List Your Creditors Who Have Secured Claims

1. For any creditors that you listed in Part 1 of Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D), fill in the information below.

Identify the creditor and the property that is collateral	What do you intend to do with the property that secures a debt?	Did you claim the property as exempt on Schedule C?
Creditor's Capital One Bank	■ Surrender the property.	■ No
name:	Retain the property and redeem it.	ΠVaa
Description of 3341 Hanover Drive Rockford,	☐ Retain the property and enter into a Reaffirmation Agreement.	☐ Yes
property IL 61101 Winnebago County securing debt:	☐ Retain the property and [explain]:	
Creditor's Illinois Department of Revenue	■ Surrender the property.	■ No
name:	Retain the property and redeem it.	
Description of 3341 Hanover Drive Rockford,	☐ Retain the property and enter into a Reaffirmation Agreement.	☐ Yes
property IL 61101 Winnebago County securing debt:	☐ Retain the property and [explain]:	
Creditor's Strategic Realty Fund, LLC	■ Surrender the property.	■ No
name:	☐ Retain the property and redeem it.	
Description of 3341 Hanover Drive Rockford.	☐ Retain the property and enter into a Reaffirmation Agreement.	☐ Yes
property IL 61101 Winnebago County	Retain the property and [explain]:	

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

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Jeremy D. Watson	Case number (if known)	
g debt:		
List Your Unexpired Personal Property Leas	ses	
rmation below. Do not list real estate leases	. Unexpired leases are leases that are still in effect; the lease period	icial Form 106G), fill has not yet ended.
your unexpired personal property leases	Will the lease	e be assumed?
name:	□ No	
n of leased	☐ Yes	
name:	□ No	
n or leased	☐ Yes	
name:	□ No	
n or leased	☐ Yes	
ame:	□ No	
n of leased	☐ Yes	
ame:	□ No	
n or leased	☐ Yes	
name:	□ No	
ii oi leaseu	☐ Yes	
name:	□ No	
n or leased	☐ Yes	
Sign Below		
nalty of perjury, I declare that I have indicated hat is subject to an unexpired lease.	d my intention about any property of my estate that secures a debt a	and any personal
eremy D. Watson	X	
emy D. Watson ature of Debtor 1	Signature of Debtor 2	
March 21, 2017	Date	
	List Your Unexpired Personal Property Leas lexpired personal property lease that you list rmation below. Do not list real estate leases ssume an unexpired personal property lease your unexpired personal property leases ame: n of leased ame: n of leased ame: n of leased ame: n of leased sime: n of leased sign Below sign Below sign Below sign D. Watson my D. Watson my D. Watson my D. Watson siture of Debtor 1	List Your Unexpired Personal Property Leases expired personal property lease that you listed in Schedule G: Executory Contracts and Unexpired Leases (Off mation below. Do not list real estate leases. Unexpired leases are leases that are still in effect; the lease period saume an unexpired personal property lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2). your unexpired personal property leases will the lease ame: not leased yes Sign Below alty of perjury, I declare that I have indicated my intention about any property of my estate that secures a debt a tat is subject to an unexpired lease.

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
+ \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee \$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes.

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 17-80630 Doc 1 Filed 03/21/17 Entered 03/21/17 11:17:25 Desc Main Document Page 56 of 64

B2030 (Form 2030) (12/15)

United States Bankruptcy CourtNorthern District of Illinois

In r	e Jeremy D. Watson		Case No.			
		Debtor(s)	Chapter	7		
	DISCLOSURE OF COMPE	ENSATION OF ATTO	RNEY FOR D	EBTOR(S)		
1.	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 201 compensation paid to me within one year before the fill be rendered on behalf of the debtor(s) in contemplation	ing of the petition in bankruptcy	, or agreed to be paid	d to me, for services rendere	d or to	
	For legal services, I have agreed to accept		\$	500.00		
	Prior to the filing of this statement I have received	1	\$	500.00		
	Balance Due			0.00		
2.	The source of the compensation paid to me was:					
	■ Debtor □ Other (specify):					
3.	The source of compensation to be paid to me is:					
	■ Debtor □ Other (specify):					
4.	■ I have not agreed to share the above-disclosed com	npensation with any other person	unless they are mer	nbers and associates of my la	aw firm.	
	☐ I have agreed to share the above-disclosed compen copy of the agreement, together with a list of the na				m. A	
5.	In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:					
	 a. Analysis of the debtor's financial situation, and rendered. b. Preparation and filing of any petition, schedules, state. c. Representation of the debtor at the meeting of credit d. [Other provisions as needed] Negotiations with secured creditors to reaffirmation agreements and applications applications of liens on here. 	atement of affairs and plan which tors and confirmation hearing, a reduce to market value; ex tions as needed; preparation	h may be required; nd any adjourned he emption planning	arings thereof;	of	
б.	By agreement with the debtor(s), the above-disclosed for Representation of the debtors in any dany other adversary proceeding.			ces, relief from stay acti	ons or	
		CERTIFICATION				
	I certify that the foregoing is a complete statement of a bankruptcy proceeding.	ny agreement or arrangement fo	r payment to me for	representation of the debtor(s) in	
ľ	March 21, 2017	/s/ Daniel A. Spri	nger			
1	Date	Daniel A. Spring Signature of Attorn Springer Law Fir 2222 E State St Suite 107 Rockford, IL 611 815.312.4725	ey m 04			
		dspringerlaw@g Name of law firm	mail.com			
		rume oj iuw jirmi				

Springer Law Firm

2222 East State St. # 107, Rockford, IL

815.312.4725

CHAPTER 7 RETAINER AGREEMENT

The undersigned agrees to hire Springer Law Firm to represent the undersigned in a Chapter 7 bankruptcy and agrees to the following terms and conditions:

- 1. The attorney fees for the Chapter 7 bankruptcy are \$500. This is a flat fee arrangement, and does not include the court costs, which are currently \$335. This is the total of your attorney fees, and Springer Law Firm will not charge you for additional work. However, if you refuse to cooperate, or fail to provide information as requested by our attorney, your case may be closed.
- 2. Fees paid to the firm become property of the firm upon payment. If before the case is filed, you decide to close out your case, Springer Law Firm will refund you any fees not earned. I assign to Springer Law Firm any amount paid towards court costs and filing fees. I authorize Springer Law Firm to transfer said funds to the firm's operating account if I decide not to file for bankruptcy, or if I breach this contract.
- 3. I agree to disclose all pertinent information to Springer Law Firm, so that the firm can properly disclose all my assets, debts, and financial history to the court. I agree to keep the firm informed on any new assets or debts I may incur from this date forward. If I do not provide the proper information, or do not cooperate with Springer Law Firm, said firm may withdraw from representation, with permission of the court.
- 4. I understand that I may not be able to protect all of my property. The bankruptcy code does not provide exemptions for everything, and as such, some of my property may be taken by the Trustee and sold.

 Additionally, if my income is too high, or if my income is not offset enough by my expenses, I understand that the Trustee may dismiss my case, or require me to file a Chapter 13 instead of a Chapter 7.
- 5. I understand that not all of my debts may be discharged in a Chapter 7 bankruptcy. Student loans, educational debts, undisclosed debt, support/maintenance, fines, debts incurred by fraud, future association/condo HOA dues, certain tax debts, or debts found non-dischargeable by a Judge are among the debts not dischargeable.
- 6. I understand that this retainer agreement is for bankruptcy representation only. Springer Law Firm will not represent me in any other case or legal matter, unless agreed to in a separate retainer agreement. This includes adversary proceedings that may fall under the bankruptcy case. This agreement does not include representation in such adversary proceedings.
- 7. I understand that all money paid towards attorney fees is non-refundable. I understand that once I pay Springer Law, that Springer Law begins work on my case. I understand that the majority of bankruptcy work is done prior to the filing of the case, and because of this the fees are earned even before the filing of the case.
- 8. I understand that before I transfer or sell any property, or incur any new debt, I will first notify Springer Law Firm and consult on the impact such action will have on my bankruptcy.
- 9. I understand that I must take 2 classes pertaining to financial management and credit counselling. Failure to take these courses will result in either my case NOT being filed, or if filed, possibly dismissed. If my case is dismissed, I understand that I will have to pay to have my case re-opened by Springer Law Firm.

10. I have received the 11 U.S.C. § 527(a) disclosures and have read them.

Dated: 3-17-17

Signature:/

Print Name: VERC

Attorney Signature:

Attorney Print

United States Bankruptcy CourtNorthern District of Illinois

		1 (of the H District of Immors		
In re	Jeremy D. Watson		Case No.	
		Debtor(s)	Chapter 7	
	N/E	NOVELCATION OF CREDITION M		
	VE	CRIFICATION OF CREDITOR M	IAIKIX	
		Number of	Creditors:	62
	The above-named Debtor(s) (our) knowledge.) hereby verifies that the list of credit	tors is true and correct t	o the best of my
Date:	March 21, 2017	/s/ Jeremy D. Watson Jeremy D. Watson Signature of Debtor		

Account Receivables Management 7834 N. 2nd Street, Unit 5 Machesney Park, IL 61115

Allied Interstate PO Box 4000 Warrenton, VA 20188

AT&T PO Box 769 Arlington, TX 76004

BMO Harris Bank PO Box 1577 Coppell, TX 75019

Capital One Bank PO Box 30281 Salt Lake City, UT 84130

City of Rockford 425 E. State Street Rockford, IL 61104

Common Boundary Wellness Center 4873 Manhattan Drive Rockford, IL 61108

Commonwealth Edison 3 Lincoln Center Attn:Bkcy Group - Claims Department Villa Park, IL 60181

Contract Callers Inc. PO Box 212489 Augusta, GA 30917

Convergent Healthcare Recoveries 124 SW Adams Street, Suite 215 Peoria, IL 61602

Credit Collections Svc. PO Box 9134 Needham Heights, MA 02494 Crusader Clinic 1100 Broadway Rockford, IL 61104

Cybrcollect PO Box 1145 La Crosse, WI 54601

Dish Network 9601 South Meridian Boulevard Englewood, CO 80112

Don Carter Lanes 4007 East State Street Rockford, IL 61108

Enhanced Recovery Corporation PO Box 57547 Jacksonville, FL 32241

First Premier Bank 3820 N. Louise Avenue Sioux Falls, SD 57107

Freedman, Anselmo, Lindberg LLC 1771 W. Diehl Road, Suite 150 Naperville, IL 60563

Harris & Harris, Ltd. 111 West Jackson Blvd. Suite 400 Chicago, IL 60604

HSBC Bank PO Box 9 Buffalo, NY 14240

IC System
PO Box 64378
Saint Paul, MN 55164

Illinois Department of Revenue Bankruptcy Section PO Box 64338 Chicago, IL 60664 Infinity Healthcare Physicians 111 E. Wisconsin Avenue, Suite 2100 Milwaukee, WI 53202

Inpatient Consultants of IL PO Box 92934 Los Angeles, CA 90009

IRS Centralized Insolvency Operation PO Box 7346 Philadelphia, PA 19101

JC Christensen & Associates 215 N. Benton Drive Sauk Rapids, MN 56379

Kirsten Watson 10465 Bluebonnet Dr. Machesney Park, IL 61115

Laura Epstein 6072 Brynwood Drive #203 Rockford, IL 61114

Linebarger Goggan Blair & Sampson 35946 Eagle Way Chicago, IL 60678

Litton Loan Servicing 4848 Loop Central Houston, TX 77081

LVNV Funding LLC PO Box 10497 Greenville, SC 29603

Midland Funding 8875 Aero Drive, Suite 200 San Diego, CA 92123

Miramed Revenue Group 991 Oak Creek Drive Lombard, IL 60148 National Bank & Trust Sycamore 230 West State Street Sycamore, IL 60178

Nationwide Credit Corporation 5503 Cherokee Avenue South Alexandria, VA 22312

Nicor Gas PO Box 2020 Aurora, IL 60507

Northland Group Inc. PO Box 390486 Minneapolis, MN 55439

Ocwen Loan Servicing 12650 Ingenuity Drive Orlando, FL 32826

Ocwen Loan Servicing LLC 1661 Worthington Road #100 West Palm Beach, FL 33409

OSF Saint Anthony Medical Center 5666 East State Street Rockford, IL 61108

Pendrick Capital Partners LLC 6029 Ridge Ford Drive Burke, VA 22015

Physicians Immediate Care PO Box 8798 Carol Stream, IL 60197

Progressive Insurance 6300 Wilson Mills Road Cleveland, OH 44143

RMH Pathologists Ltd. 6785 Weaver Road, Suite D Rockford, IL 61114 Rock River Water Reclamation Dist. 3501 Kishwaukee Street Rockford, IL 61109

Rockford Associated Pathologists 1400 Charles Street Rockford, IL 61104

Rockford Health Physicians 2300 N. Rockton Avenue Rockford, IL 61103

Rockford Health System 2400 N. Rockton Avenue Rockford, IL 61103

Rockford Mercantile Agency, Inc. 2502 South Alpine Road Rockford, IL 61108

Rockford Orthopedic 324 Roxbury Road Rockford, IL 61107

Rockford Radiology Associates 2400 N. Rockton Avenue Rockford, IL 61103

Security Finance Corporation PO Box 3146 Spartanburg, SC 29304

State Collection Service PO Box 6250 Madison, WI 53701

Stellar Recovery Inc. 1327 Highway 2 W, Suite 100 Kalispell, MT 59901

Strategic Realty Fund, LLC c/o Stonecrest Financial 4300 Stevens Creek Blvd. #275 San Jose, CA 95129

Swedish American Medical Group PO Box 1567 Rockford, IL 61110

T-Mobile Bankruptcy Team PO Box 53410 Bellevue, WA 98015

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